

North-Central Regional Time Sensitive Emergency (TSE) Committee Meeting Minutes

November 4, 2014

Present: Matthew Dudley, Richard Frank, Lenne Bonner, Kelly McGrath, Patty Barnett, M. Rooney, Carol Moehrle, Mark McGahan, Jesse Shepherd, Bob Montgomery, Jason Steik, Jay Hunter, Stewart Mason, Arif Chowdhury, Curt Brimacombe, Dom Pomponio, Patrick Branco, Les Eaves, Travis Myklebust, Dave Reynolds, Bill Spencer, Jill Balmer, Mirea Sochank, Katy Quinn, Josh Kimbrow, Wayne Denny, Christian Surjan, Nicole Noltensmeyer, and by phone Bill Morgan and Tema Jessup.

Next meeting: TBD

I. Welcome and Introductions

Bill Spencer opened the meeting. All participants introduced themselves.

II. Overview of the TSE program

Wayne Denny, EMS & Preparedness Bureau Chief gave a brief history of the TSE program to date. He explained that Dr. Morgan and Dr. Polk recognized the issue of not having a statewide trauma system. As they brought other people on board with their vision for a system, the TSE Workgroup was formed. It was decided after extensive research and recommendations from other states that including stroke and STEMI in the system would bring greater benefits to Idaho. Wayne also discussed the importance of the Regional TSE Committees within the system.

Dr. Bill Morgan, joining the meeting by phone, discussed the two main benefits of having a state-wide system: better patient outcomes and a decrease in healthcare costs. He also explained that the criteria for designation came primarily from the American College of Surgeons, the American Heart Association, and the American Stroke Association. A complete list of referenced documents can be found in the TSE Standards Manual, which is currently available in draft form on the TSE website. <http://tse.idaho.gov/>

Bill Spencer, TSE Council member, added that the TSE Council has worked hard to make the system affordable, especially for the Critical Access Hospitals. He also stated that two of the major benefits of a regional committee are case reviews and standardized transfer protocols. The overall goal of the regional committees is to improve patient outcomes.

A question was asked about communities that border other states that already have designations in the border state. Bill Spencer indicated that the TSE Council was aware of that issue and was working toward an answer.

III. Overview of Committees and Bylaws

Christian Surjan gave the participants a template for developing regional committee bylaws. The template is color coded. Items in black are taken straight from Idaho Code and must remain in the bylaws. Items in green can be changed for each of the six state regions, but should remain consistent throughout each region. Items in red are for the committee's consideration. Each regional committee has the flexibility to create bylaws that work best for their region.

IV. Election of Officers

For Chairperson, Dr. Jay Hunter received the only nomination. His election was unanimous by all those in attendance. Dr. Hunter accepted the nomination.

For Vice-Chair, Josh Kimbrow nominated himself, as did Les Eaves. They were each given a moment to speak, and then left the room for the vote. The result was one vote for Josh Kimbrow, and all the others for Les Eaves. Les accepted the position.

For Secretary, Lenne Bonner received the only nomination. Her election was unanimous by all those in attendance.

V. Q & A on Rules and Standards Manual

Q. How will the registry work?

A. Most likely, the Idaho Hospital Association, which currently contracts to manage the state's trauma registry, will add modules for stroke and STEMI. The other options are using Get With The Guidelines or the Idaho Health Data Exchange. The Council is currently gathering data in order to make a final decision.

There were no other questions.

VI. Schedule Future Meetings

The next meeting will be scheduled for the third week in November (likely the 19th or 20th) in the evening.

VII. Adjourn